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ABSTRACT

This publication is designed as a resource guide for classroom teachers, special education teachers, and administrators in the state of Virginia in fulfilling state and national mandates for the physical education of handicapped children. Introductory discussion centers around (1) the term "handicapped" and the disabling conditions contained within that term; (2) determination of eligibility for special education; (3) development of individualized programs for each handicapped student; and (4) the requirement that students be placed in the least restrictive environment. Programming concerns examined include: (1) assessment; (2) long- and short-term goal formulation; (3) general course development; (4) teaching suggestions for specific handicapping conditions; and (5) evaluation of handicapped students' progress. A discussion of equipment needs for handicapped students examines facility needs both inside and outside the school building, basic equipment, and adaptive physical education equipment, including inexpensive homemade equipment. A bibliography of 69 publications on adapted physical education is included. (MJB)

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PHYSICAL EDUCATION FOR HANDICAPPED STUDENTS

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Division of Special Education and Health and Physical Education Service
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FOREWORD

Physical education has long been recognized for its unique contribution to the development of each child. Physical education goals for the handicapped are the same as those for all students -- physical, social, mental, and emotional development.

The schools' responsibility for providing physical education for handicapped students is clearly defined in the following provision of the Code of Virginia:

> 22-213. All pupils, in all public elementary and high schools for the State shall receive as part of the education program such examination, health instruction, and physical training as shall be prescribed by the State Board and approved by the State Board of Health, in conformity with the provisions hereof.

Also, Standards of Quality and Objectives for Public Schools in Virginia states:

> Each school division shall have a program, acceptable to the Board of Education, for early identification of students who may need special education. When handicapping conditions have been identified, such students shall be provided with a program of special education which is acceptable to the Board of Education.

The Education of All Handicapped Children Act (Public Law 94-142), which must be implemented starting with the 1977-78 school year, is designed to insure that all handicapped children have available to them an appropriate public education, including special education and related services to meet their unique needs. The law also seeks to insure that the rights of handicapped children and their parents are protected, provides assistance to states and localities for the education of all handicapped children, and requires an assessment of the effectiveness of efforts to educate such children. Instruction in physical education is specifically included in the definition of special education.

The rule §121a,307 Physical Education of PL 94-142 states:

(a) General. Physical education services, specially designed if necessary, must be made available to every handicapped child receiving a free, appropriate public education.

(b) Regular physical education. Each handicapped child must be afforded the opportunity to participate in the regular physical education program available to non-handicapped children unless:

(1) The child is enrolled full time in a separate facility; or

(2) The child needs specially designed physical education, as prescribed in the child's individualized education program.

(c) Special physical education. If specially designed physical education is prescribed in a child's individualized education program, the public agency responsible for the education of that child shall provide the services directly, or make arrangements for it to be provided through other public or private programs.

(d) Education in separate facilities. The public agency responsible for the education of a handicapped child who is enrolled in a separate facility shall insure that the child receives appropriate physical education services in compliance with paragraphs (a) and (c) of this section.

This publication, Physical Education for Handicapped Students, has been prepared for use by classroom teachers, special education teachers, physical education teachers, and administrators who work with handicapped students. It is a resource guide that supplements the curriculum guides, Physical Education, Kindergarten Through Grade Seven and Physical Education for Virginia Secondary Schools.

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PART I

INTRODUCTION

A comprehensive physical education program for all students must be based on a common core of learning experiences. The program should serve the divergent needs of all students. Therefore, physical education goals for the handicapped are the same as those for all students in Virginia's public schools. Also, there are functional goals that relate to handicapped students. These goals give direction to the physical education program and may be translated into readily attainable and measurable objectives for each participant. Functional goals may include:[1]

- Acquainting each student with information about his or her limitations and capacities;
- Providing each student with opportunities to develop organic vigor, muscular strength, joint function, and endurance within limits of the individual's disabilities;
- Providing each student with opportunities for normal social development through recreational sports and games that are appropriate to age group and interests;
- Providing each student with appropriate opportunities to develop skills in recreational sports and games;
- Contributing to the student's ability to meet the demands of daily living;
- Aiding in the social development of an individual who has a permanent disability;
- Developing personal pride in overcoming impairments and disabilities;
- Developing appreciation for individual differences and the capacity to accept limitations without withdrawing from a group.

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[1] American Alliance for Health, Physical Education, and Recreation, Adapted Physical Education Guidelines - Theory and Practice for the Handicapped, (Washington, D. C.: AAHPER Information and Research Center (IRUC), 1976), p. 23.

Whenever possible, handicapped students should be included in the regular physical education program. Such students may include those who are mentally retarded, orthopedically impaired, deaf and hearing impaired, visually impaired, emotionally disturbed, learning disabled, multihandicapped, and those who have other health impairments (e.g., slight cardiac (heart) disturbance; low level of physical fitness; obesity; those who are temporarily in need of special consideration, such as, students who have returned to school after recovering from an operation or other illness).

Regardless of handicapping conditions, all students can benefit from a planned physical education program designed to meet their individual needs. Scheduling and selecting activities for some handicapped children (e.g., those with a cardiac (heart) disturbance) should be done, however, with the aid of a physician.

Some schools provide opportunities for further development of knowledge and skills gained in the instructional physical education program. This may be done in school-related programs such as play days, intramurals, demonstrations, and interscholastic athletic competition. There should be a place for handicapped students in these programs.

The teacher who is concerned with the needs of handicapped children and individualizes instruction will provide meaningful physical education experiences for each child. The physical education teacher, special education teacher, and classroom teacher should work together in planning experiences for the handicapped.

Who Are The Handicapped?

Handicapped children include those who are identified as mentally retarded, emotionally disturbed, orthopedically impaired, visually impaired, deaf or hearing impaired, speech impaired, or are multihandicapped or have learning disabilities

or other health impairments. Such children need special education and related services. The terms used are defined as follows:[1]

Mentally Retarded

Mentally retarded children are those whose mental capacity is such that they cannot be educated adequately in regular classes in the public schools without special education or related services.

(a) Educable mentally retarded. Children who are educable mentally retarded are those whose intellectual development and academic achievement are below the development and achievement of their peers.

(b) Trainable mentally retarded. Children who are trainable mentally retarded are those whose educational needs cannot be met in a program designed for the educable mentally retarded.

Orthopedically Impaired

Orthopedically impaired means a severe orthopedic impairment which adversely affects a child's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputations, and fractures or burns which cause contractures).

Seriously Emotionally Disturbed

The term means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree which adversely affects educational performance:

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[1] Division of Special Education, Department of Education, Administrative Requirements and Guidelines for Special Education Programs, (Richmond, Va.: Department of Education, Commonwealth of Virginia, 1972).

(a) An inability to learn which cannot be explained by intellectual, sensory, or health factors;

(b) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;

(c) Inappropriate types of behavior or feelings under normal circumstances;

(d) A general pervasive mood of unhappiness or depression; or

(e) A tendency to develop physical symptoms or fears associated with personal or school problems.

The term includes children who are schizophrenic or autistic. The term does not include children who are socially maladjusted, unless it is determined that they are seriously emotionally disturbed.

Specific Learning Disability

Specific learning disability means a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain disfunction, dyslexia, and developmental aphasia. The term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps, of mental retardation, or of environmental, cultural, or economic disadvantage.

Speech Impaired

Speech impaired means a communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment, which adversely affects a child's educational performance.

Deaf

Deaf means a hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, which adversely affects educational performance.

Hearing Impaired

Hard of hearing means a hearing impairment, whether permanent or fluctuating, which adversely affects a child's educational performance but which is not included under the definitior of deaf in this section.

Deaf-Blind

Deaf-blind means concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational problems that they cannot be accommodated in special education programs solely for deaf or blind children.

Multihandicapped

Multihandicapped means concomitant impairments (such as mentally retarded-blind, mentally retarded-orthopedically impaired, etc.), the combination of which causes such severe educational problems that they cannot be accommodated in special education programs solely for one of the impairments. The term does not include deaf-blind children.

Visually Impaired

(a) Children who are legally blind are those who have 20/200 vision or less in the better eye, with correction.

(b) Children who are partially sighted are those who have 20/70 vision or less in the better eye after correction, up to but not including the definition for legal blindness. In some instances an eye doctor may recommend services for a child who has better visual acuity than 20/70.

Other Health Impaired

Other health impaired means limited strength, vitality or alertness, due to chronic or acute health problems such as a heart condition, tuberculosis,

rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes, which adversely affects a child's educational performance.

Determination of Eligibility for Special Education

Students who are suspected of being handicapped may be referred to the person responsible for special education in the local school division. A multi-factored assessment including medical, psychological, sociological, and educational evaluations is obtained for each student who is potentially eligible for special education services. A team of professional persons (psychologists, special educators, visiting teachers, regular educators, etc.) reviews the assessment components, identifies the handicapping condition(s), and determines the need for special education or related services.

Public Law 94-142, Section 4(19) identifies special education as follows:

> "The term 'special education' means specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction and instruction in hospitals and institutions."

Individualized Education Program

After eligibility has been determined, an individualized education program must be developed for each handicapped student. Public Law 94-142 specifies the requirements for the development of such programs. Section 4(19) of Public Law 94-142 provides:

> "The term 'individualized education program' means a written statement for each handicapped child developed in any meeting by a representative of the local educational agency or an intermediate educational unit who shall be qualified to provide, or supervise, the provision of specially designed instruction to meet the unique needs of handicapped children, the teacher, the parents or guardian of such child, and whenever appropriate, such child, which statement shall include:

(A) a statement of the present levels of educational performance of such child;

(B) a statement of annual goals, including short-term instructional objectives;

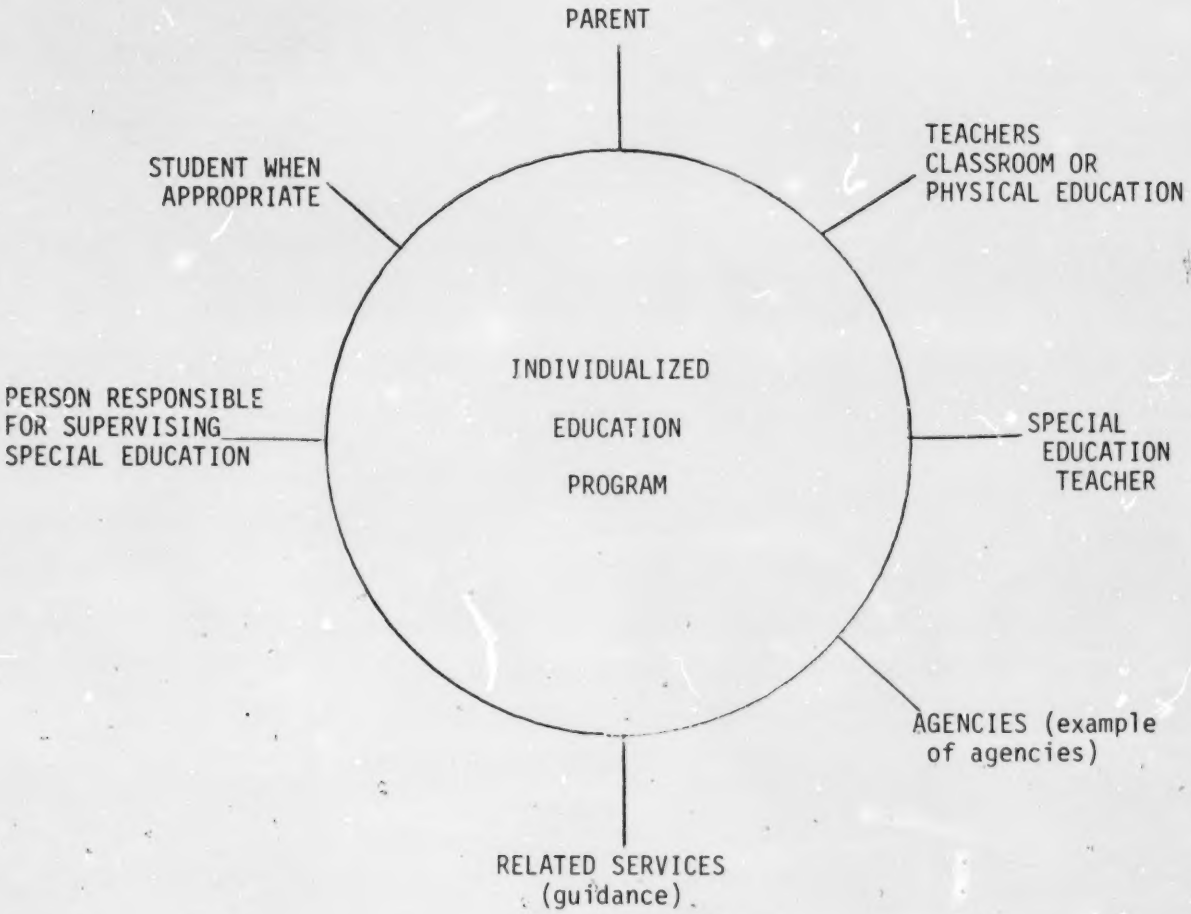
(C) a statement of the specific educational services to be provided to such child, and the extent to which such child will be able to participate in regular educational programs;

(D) the projected date for initiation and anticipated duration of such services; and

(E) appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether instructional objectives are being achieved."

"Special education" - specially designed instruction to meet the unique needs of a handicapped child must include instruction in physical education. Therefore, each individualized education program (IEP) must include a physical education component. The component will vary and may range from placement in the regular physical education program to a variety of modifications. It is recommended that the person responsible for teaching physical education be a member of the team developing the Individualized Education Program.

Parent involvement is required throughout the process of determining eligibility and developing the individualized education program and for the duration of the special education program. Written permission of parents is required for evaluation as well as for the special education program and related services.



The preceding chart illustrates the principle that a comprehensive Individualized Education Program requires the coordinated effort of all concerned in planning and implementing a program for each handicapped child. (Examples of the IEP's may be found in Appendixes A and B.) The team developing the Individualized Education Program is responsible for determining appropriate program of the student. Consideration should be given to the possible effect the environment will have on the student. Placement must be reviewed at least annually.

Least Restrictive Environment

Local education agencies must "assure that to the maximum extent appropriate, handicapped children, including children in public or private institutions or other care facilities, are educated with children who are not handicapped and that special classes, separate schooling, or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily."[1]

Steps should be taken to assure that placement in a least restrictive environment will not have a harmful effect on the student or reduce the quality of services required. Each handicapped student's educational placement must be determined at least annually and be based on the individualized education program.

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[1]Public Law 94-142 - Section 612 (3)

PART II

PROGRAMMING

Whether a student is placed in a regular class, special class, special school, or remains at home, a physical education program must be provided to meet individual needs. The placement of a student will be determined by an assessment made prior to the writing of the Individualized Education Program. A program for a handicapped student should include assessment, development of long-term goals, short-term objectives, utilization of activities to meet the objectives, and an on-going evaluation of the student's progress.

Assessment

The physical education teacher should study the Individualized Education Program for each handicapped student. An assessment also should be made to determine the student's motor ability, skills, and level of performance. This may be done through the use of standardized and teacher-made tests and teacher observation. Many standardized tests or surveys such as the following may be used:

Peabody Developmental Motor Scales (Gross and Fine Motor)

Denver Development Screening Test (Gross and Fine Motor)

Carolina Developmental Profile (Gross and Fine Motor, Visual Perception)

The American Alliance for Health, Physical Education and Fitness Test (AAHPER Physical Fitness Test)

Move-Grow-Learn: Movement Skills Survey (Gross, Fine, and Eye Motor)

Purdue Perceptual-Motor Survey (Balance, Posture, Body Image)

These and many other tests and surveys are listed, along with descriptions, in the publication, Testing for Impaired, Disabled and Handicapped Individuals (See Bibliography, No. 68). Teachers should not limit themselves, however, to

using only standardized tests in evaluating the students' physical skills; they can develop their own evaluation tools to determine specific needs.

Long-Term Goals

The physical education teacher should study the long-term goals for physical education included in the Individualized Education Program for each handicapped student. If, after further assessment in physical education, the teacher finds that the goals should be changed, a request for a revision of the long-term goals should be presented to the IEP Team.

Short-Term Objectives

After the long-term goals have been agreed upon, using the team approach, short-term instructional objectives should be developed. Short-term objectives must be measurable and designed to accomplish the long-term goals. The duration of a short-term objective varies from individual to individual, depending upon assessed needs.

Included in the development of short-term objectives should be procedures for review and evaluation that will continually assess the student's progress in a particular task. This will allow the teacher to modify an objective if it is found to be unrealistic. The objectives must be realistic in relation to the student's ability, and at the same time they must be challenging and motivating. The objectives should be designed to meet the needs of the student, be based on sound developmental principles, and be sequential in structure.

Physical Education Program

Once the placement of a handicapped student has been determined and long-term goals and short-term objectives have been established, a program of activities

that will help achieve them must be developed. Physical education services, specially designed if necessary, must be provided for every handicapped student who is receiving an appropriate public education. The Individualized Education Program will identify students who should be placed in the regular physical education program and those students who will need specially designed physical education. Those programs are explained below:

Regular Physical Education Program

The Department of Education's guides, Physical Education, Kindergarten Through Grade Seven and Physical Education for Virginia Secondary Schools, will assist teachers in providing a comprehensive physical education program for kindergarten through grade 12. The teacher should follow the suggestions about planning, initiating, and conducting physical education activities, making appropriate adjustments needed for handicapped students. There should be continuous communication between the special education teacher and the physical education teachers. The "General Suggestions for Teachers" on page 16 and "Teaching Suggestions for Specific Handicapping Conditions" on page 17 may help teachers make adjustments where needed.

Specially Designed Physical Education

"If specially designed physical education is prescribed in a child's Individualized Education Program, the public agency responsible for the education of that child shall provide the services directly or make arrangements for it to be provided through other public or private programs."[1] Many students need "specially designed physical education." Included are those with severe physical handicaps, such as:

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[1]Federal Register, Vol. 42, No. 163, Education of Handicapped Children, §121a.307, (Washington, D.C., Department of Health, Education, and Welfare, 1977), p. 42489

1. Serious impairment of locomotion
2. Severe sensory impairment
3. Severe cardiovascular, respiratory, or glandular conditions
4. Severe postural conditions
5. Other severe physical conditions

Classes for the severely physically handicapped should be scheduled as part of the total program. The classes should be limited to not more than eight students at any time and an aide should be present. The same procedure also may be followed in scheduling classes for severely, profoundly retarded students. In providing instruction, teachers should follow regular procedures as much as possible. The teacher should have a major in physical education, including course work in adapting physical activity to individual needs. "In addition, the teacher should possess the following qualities: (1) the ability to be creative, resilient, and resourceful; (2) an understanding of the objectives and principles of adapting physical education to the needs of individual pupils; (3) a positive attitude toward the physically handicapped (i.e., patient, optimistic, encouraging, and enthusiastic to a greater degree than is necessary for teaching pupils with no handicapping conditions); (4) a high degree of empathy and an understanding of interpersonal relations; and (5) the ability to teach a wide range of physical education activities."[1]

The program for students referred for "specially designed physical education" should be based on medical, as well as educational, data. Before planning the

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[1]California State Department of Education, Instruction of Physically Handicapped Minors In Remedial Physical Education, (Sacramento, CA., Department of Education, 1970), p. 3

program, a completed referral form from a physician may be necessary. It should include the diagnosis of the student's condition, functional capacity, or exercise tolerance level, an indication of areas of the body for which activity should be increased, minimized, or eliminated; and recommendations for corrective exercises or remedial activities. (Samples of referral forms have been included in the appendix. (See Appendixes C and D.) The information from the physician will help the teacher individualize the program of activities according to the students' needs. It is important that the form used as well as the program be explained to physicians.

The following policies are recommended for developing a course of study for each student required to have "specially designed physical education:"

Each class should be conducted as an individualized course for each student

The program should approximate the "regular" program as much as possible.

The program must be creative and should encourage each student to strive for his or her best performance.

Activities that motivate and serve as a means for measuring improvement should be employed to meet individual student needs.

The basic philosophy for the course should include getting eligible students assigned to other courses offered in physical education. Appropriate persons must determine the needs of each student, give them priorities, and then provide a program to meet those needs.

Special attention should be given to class procedures and organization. An explanation of the section of the Individualized Education Program dealing with physical education should be given to all students so they can understand their abilities, their limitations, and their potential for physical activity. The teacher may find helpful the "General Suggestions for Teachers" on page 16 and "Teaching Suggestions for Specific Handicapping Conditions" on page 17. An efficient record keeping system should be developed and used by each teacher of

a specially designed physical education class. Forms should be developed to expedite record keeping, counseling, and instruction. The records should include:

1. Pupil data card, with name, address, telephone number, class, date entering class, date leaving class, physical status, limitations, and physician's name and telephone number.

2. Referral form, including physician's findings and recommendations -- specifically: (a) diagnosis; (b) probable prognosis; (c) date of reexamination; (d) indication of any unremediable handicaps; (e) specific limitations; and (f) exercises or activities recommended.

3. Inspection chart (pictures or drawings) of postural conditions.

4. A chart for recording progressive measurements such as height, weight, arms, chest, legs, and waist, measurements should be taken once a semester or more frequently for motivation of the student.

5. A form for identifying progressive exercises for each student, including items such as name and description of exercises (with pictures, if possible), part of body used, equipment, number of repetitions and sets, and amount of resistance (if any).

6. A card or form for recording test data, including scores of physical performance tests administered to students.

7. Chart showing the results of participation in activities adapted to individual needs.

8. Evaluation chart of pupil progress, including achievement mark (grade).

Students should be organized for instruction as quickly as possible. Each student should be provided with a daily "activity card." The card should be reviewed periodically and the student's activities changed or modified as needs indicate. Each new member of the class should be assigned activities. Since this procedure can be a lengthy one, efforts should be made to occupy the other students profitably while they are waiting for individual conferences. One or more of the following activities may be scheduled for the student:

1. Participating, to the extent physical capacities permit, in games such as shuffleboard, horseshoes, and table games;

2. Working with a classmate as a "buddy" who requires a similar remedial program;

3. Observing individual exercises being taught to classmates.

NOTE: Severly physically handicapped students should not be given mass calisthenics, and exercises should be given to small groups of students only if they have similar physical conditions.

General Suggestions for Teachers

Every student will be able to participate in a variety of activities when appropriate adjustments are made. Listed below are suggestions to assist teachers in making such adjustments:

1. Provide flexible time periods for instruction and activity to insure continued interest and participation;

2. Plan activities so that every student has an opportunity to participate in them;

3. Continually communicate with the special education teacher relative to the program of activities;

4. Modify game requirements for beginners so that they do not contain limiting conditions which reduce chances of success;

5. Permit sitting in games usually played in a standing position;

6. Allow the use of two hands instead of one where accuracy or power is involved;

7. Shorten distances; lower baskets and nets; increase distances and heights gradually as students improve;

8. Shorten the time involved in an activity if interest wanes;

9. Increase the size of striking implements and targets; decrease as accuracy improves;

10. Increase or decrease size of manipulative equipment and return to regulation size as skills increase;

11. Soften landing spots with mats;

12. Give frequent praise for accomplishment;

13. Discuss problems related to students not dressing, showering, and participating with the special education teacher.

Teaching Suggestions for Specific Handicapping Conditions

Orthopedically Impaired

Orthopedically impaired students can participate in most physical education activities with appropriate modification.

A. Suggestions for teachers

1. Obtain periodic medical approval of the student's program;

2. Carefully plan exercises and activities to conform to the medically approved program;

3. Obtain new medical recommendations after a student is absent because of illness or surgery;

4. Pair ambulatory and non-ambulatory students for mutual assistance and cooperation;

5. Plan so that every student has an opportunity to participate as much as possible;

6. Be aware that the handicapped student requires more individual and hazard-free space for activity than the non-handicapped student;

7. Provide frequent periods of rest for those with limited endurance;

8. Be aware of the dangers of twisting, bending, falling, and lifting;

9. Teach the orthopedically handicapped to fall correctly from crutches, wheelchairs, or unsupported positions;

10. Substitute sitting or lying positions for standing positions, when necessary;

11. Use lighter-weight equipment, when necessary;

12. Encourage participants in rhythms to keep a beat by a method other than clapping, when necessary;

13. Substitute wheelchair, crutch, or walker ambulation for locomotor skills;

14. Have an ambulatory student push one who is in a wheelchair to help the second student express movement;

15. When necessary, have students on crutches throw underhand instead of overhand;

16. Allow additional stops in games requiring running or movement;

17. Attach the upper edge of a sheet or net to wall or backboard and lower edge to student's location for retrieval of ball when working with target or basket activities.

B. Example:

1. General Objective: to play volleyball independently, according to the student's abilities.

2. Specific Objective: to serve the volleyball over the net and into the opposite court three out of five times (use of any modification of the serve is acceptable).

3. Activity: use a volleyball, a net, and a hazard-free flat surface. Lower the net or shorten the distance to the net only when necessary. Practice serving, using any mobile part of the body or prosthesis (i.e., knee, shoulder, crutch, etc.)

4. Assessment: serves the ball over the net and into the opposite court three out of five times.

Learning Disabled

The learning disabled student may have difficulties processing verbal instructions, remembering the sequence of instructions, interpreting visual signs and markings, and relating to the activity space. Short attention span, tension, and sometimes inappropriate social behavior result in a need for a structured environment.

A. Suggestions for teachers:

1. Give instructions one at a time, speaking slowly and distinctly;

2. Use short, simple sentences and face the student when giving instructions;

3. Eliminate as much extraneous auditory and visual stimuli as possible;

4. Plan with the student to use a manual signal (e.g., finger on ear or nose) to gain attention;

5. Use imagery appropriate for age and activity;

6. Use multisensory cues, such as pointing in the direction you are discussing and having the student do the same;

7. Set limits of acceptable behavior individually with the hyperactive or impulsive student so that the student knows the teacher understands his or her problem but expects compliance with the rules;

8. Provide time before class to review with the student written materials that are to be used;

9. Use a student's ambidextrous ability as an opportunity to enhance self-esteem;

10. Plan so that the student has many successful experiences, especially at the beginning of the school year.

B. Example:

1. General Objective: to identify different types of space in a structured environment.

2. Specific Objective: to move within the individual space.

3. Activity: students are assigned color spaces to occupy and asked to sit inside the space. The teacher should use the suggestions previously given to assist learning disabled students. To help each student gain experience about the shape of the assigned space, the teacher may request that he or she:

   Walk around the inside of the color space;

   Put the body inside and the hands and feet outside the color space;

   Curl up and make yourself very small inside the color space;

   Stretch yourself so that you are bigger than your space.

4. Assessment: the student identifies space, follows movement commands, and makes appropriate responses within assigned space.

Speech Impaired

Students with speech impairments should be able to participate in regular physical education activities.

A. Suggestions for Teachers:

1. Use familiar words when giving instructions.

2. Individuals who cannot solve language problems may be unable to follow instructions even if they have a good vocabulary. They may need a breakdown of the instructions into smaller steps.

3. As speech improves, encourage students to use newly acquired skills.

B. Example: No example is given because students with speech impairments usually participate in regular physical education programs. The physical education teacher should be sensitive to student needs and consult with the speech pathologist if reinforcement is necessary in the classroom.

Deaf and Hearing Impaired

Communication and balance are some areas of concern for the deaf and the hearing impaired. Very few modifications of activities or equipment will be necessary for this group.

A. Suggestions for Teachers:

1. Place the student where the teacher's face is visible;

2. Establish eye contact when initiating an activity;

3. Use hand signals along with verbal commands;

4. Use many visual aids and demonstrations;

5. Encourage the student to follow the example of classmates;

6. Supplement calling the name of the deaf student with a tap or hand indication;

7. Be aware that deaf and hard-of-hearing students may have balancing difficulties;

8. If balance is a problem, help the student select game positions that have a minimum of spinning movements or sudden direction changes;

9. Post safety rules for use of facilities and equipment at eye level and in appropriate locations.

B. Example:

1. General Objective: to participate effectively and independently in rhythmic group activity.

2. Specific objective: to keep rhythmic time by moving any part of the body to two-four time.

3. Activity: sit in a circle facing inward. Using various parts of the body, play rhythmic follow-the-leader. Rotate leaders. Provide vibratory rhythm with a percussion instrument or record. A strong bass provides maximum vibration.

4. Assessment: performs successfully as the leader in rhythmic "follow-the-leader" by leading the group to two-four time for 10 seconds.

Mental Retardation

Mental retardation refers to a condition in which the student functions significantly below average in intelligence and adaptive behavior. Because of their lower level of intellectual functioning mentally retarded students are not able to assimilate information at the same rate as average students. Therefore, adaptations in instruction are needed for such students.

I. Educable Mentally Retarded

A. Suggestions for Teachers:

1. Extend learning time periods;

2. Use simplified and sequential instructions;

3. Reinforce terminology of the activities;

4. Praise abilities;

5. Use structured routines;

6. Find ways to provide opportunities for decision making and independent action;

7. Provide opportunities for increasing emotional adaptability;

8. Provide opportunities for the student to feel a part of the group;

9. Continue to emphasize safety rules;

10. Use demonstrations by teachers or other students.

B. Example:

1. General Objective: to successfully play flag football as a team member.

2. Specific Objective: to demonstrate knowledge of team member rules by playing a designated position properly for 10 minutes without a violation.

3. Activity: List equipment. Play a game of flag football. Use teaching suggestions given above.

4. Assessment: group participation and team play. To follow the rules while playing a designated position for 10 minutes without a violation.

II. Trainable Mentally Retarded

A. Suggestions for teachers:

1. Extend learning time periods;

2. Use fewer game terms and frequently reinforce terms used;

3. Simplify sequence and repeat instructions;

4. Shorten sentences;

5. Teach one skill at a time;

6. Praise abilities;

7. Use color coding when necessary;

8. Decrease actual game time until endurance has developed;

9. Teach and stress safety rules;

10. Use demonstrations by teacher or other students;

11. Modify rules, if necessary.

B. Example:

1. General Objective: to successfully play flag football as a functional team member.

2. Specific Objective: to participate independently as a member of a team.

3. Activity: using two sets of colored flags, a football and goal markers, play a game of flag football. Use teaching suggestions for teachers given above.

4. Assessment: follow rules while playing a designated position for 10 minutes.

Emotionally Disturbed

While the emotionally disturbed student can participate in most physical education activities, the teacher should be aware of, and plan for, rapid changes of mood and attitude that these students may exhibit. Since surprises may upset the student, the teacher should plan the procedures to be followed before he or she comes to the physical education class. The procedures which should be in writing and agreed to by all concerned, including the student, should be followed carefully on all occasions. There will be little need for adaptation for most emotionally disturbed children.

A. Suggestions for Teachers:

1. Plan arrival and departure procedures and follow them carefully;

2. Minimize the waiting time for activity to begin;

3. Avoid unsupervised periods of time;

4. Minimize "lining up" and "staying in line";

5. Give ample warning before making changes in routine, scheduling classes, etc. Avoid sudden changes of program and ask the special education teacher to help explain changes ahead of time;

6. Offer choice of activities on occasions;

7. Include many non-competitive games and activities. Minimize competition. Foster the idea of participating for fun and enjoyment;

8. Praise abilities;

9. Use activities that teach the student to understand the parts of the body and their relationship to space and how to move in space;

10. Arrange for careful supervision of locker and shower rooms. (Many emotionally disturbed students will refuse to remove their clothes and dress for physical education class in what they feel is a public situation. These inhibitions should not be dealt with in the locker room. Alternative arrangements should be made until the situation improves.)

B. Example:

1. General Objective: to play a regular or modified game of badminton.

2. Specific Objectives: to develop enough skill to return two or more continuous volleys of the shuttlecock (birdie).

3. Activity: using a net, rackets, and shuttlecock, practice volleying shuttlecock to another player.

4. Assessment: to volley the shuttlecock two or more times in succession with a skilled opponent.

Visually Impaired

A physical education program for visually impaired students often needs little modification. Some changes may be necessary, however, to accommodate students with eye conditions that will not permit them to participate in the regular program.

I. Partially Sighted

A. Suggestions for Teachers:

1. Be aware of potentially dangerous situations that might cause additional eye damage;

2. Modify the distance required for recognition of objects;

3. Enlarge target object;

4. Use brightly colored objects;

5. Provide maximum lighting;

6. Be aware of possible need to modify activities that require sudden change in direction.

B. Example:

1. General Objective: to develop independent full-time class participation in track and field activities.

2. Specific Objective: to successfully clear the high jump bar set at a challenging height.

3. Activity: While practicing the running high jump, allow the student to approach the bar from any angle or distance desired.

4. Assessment: the student can clear the bar once in three tries.

II. Totally Blind

NOTE: Further modifications are needed for the totally blind.

A. Suggestions for Teachers:

1. Be aware of potentially dangerous situations chat might cause additional eye damage;

2. Use verbal instruction;

3. Use auidble goal locators;

4. Use audible balls (softball, football, soccerball);

5. Use guide wires for running;

6. Reduce speed of activity;

7. Use tactile instruction

   (a) Teacher as model

   (b) Another student as model

   (c) Move student through activity;

8. Use sighted partner as a running mate.

B. Example:

1. General Objective: to develop independent full-time class participation in track and field activities.

2. Specific Objective: to clear the high jump bar set at a challenging height.

3. Activity: allow the totally blind to place one hand on the bar to locate it and perform a one-step high jump.

4. Assessment: the student can clear the bar once in three tries.

Other Health Impairments

In addition to handicaps previously described, some students will have other health impairments. These impairments may include limited strength, vitality, or alertness due to chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, epilepsy, hemophilia, lead poisoning, leukemia, or diabetes. While there may be no outward or visible signs of a handicap, it is important for the teacher to understand the student's impairment and how it affects his or her capacity for physical exercise.

Students should learn to understand their capacities and limitations in order to protect themselves from conditions that may be aggravated by inappropriate activities. Students with health impairments should be able to participate in the regular physical education program with only limited restrictions. For example, hemophilic students may be restricted from engaging in physical contact and students with certain types of heart conditions may not be permitted to participate in prolonged, strenuous activities. It is important that opportunities be provided for these students to develop skills that will enable them to enjoy many recreational activities. The physical education program also should provide opportunities for social and emotional adjustment that will enable these students to feel secure in a group setting.

Evaluation

Evaluation of performance, achievement, and progress must be a part of every physical education program regardless of the age, overall ability, or physical fitness of each student. The evaluation of the handicapped student's progress should reflect the objectives established for each individual. Students who participate in both the regular physical education program and the "specially designed physical education" program will need to be evaluated to determine their progress and grades. Grades should be based on the individual student's ability, effort, and progress. A number of standard physical fitness and motor skill tests have been developed for use with handicapped students. (See Bibliography, AAHPER Publications, page 34 .)

Play Days, Demonstrations - Intramurals, Interscholastic Athletics

Many schools provide opportunities for students to participate in school-related programs such as play days, demonstrations, intramurals, and inter-scholastic athletics. These activities contribute to the further development of skills gained in the instructional physical education program. When properly planned and conducted, such experiences can provide significant personal, social, and physical benefits for students.

Information relative to these programs may be found in the Department of Education's guides, Physical Education, Kindergarten Through Grade Seven and Physical Education for Virginia Secondary Schools. Additional information may be obtained from the Virginia High School League, School of Continuing Education, University of Virginia, Charlottesville, Va.

PART III

FACILITIES AND EQUIPMENT

Facilities

When a local school division is planning new facilities or modifying existing ones, the superintendent may want to appoint a special committee to assist in developing these plans. Basic modifications to plans or existing facilities should be realistic in meeting the needs of the handicapped students.

Some of the factors which should be taken into consideration are as follows:

Within Building

1. Doorways wide enough and barrier free
2. Doors easy to open
3. Ramps with handrails on both sides
4. Handrails where needed
5. Elevators or chair lifts when necessary
6. Private shower stalls with rails
7. Floors with non-slip surfaces
8. Restrooms with space enough to close door for privacy
9. Toilet seats of proper height and with rails provided
10. Special sinks and drinking fountains
11. Adequate storage space for equipment
12. Telephones within reach
13. Aesthetically pleasing environment
14. Hallways clear of hazards extending from walls and ceilings
15. Provision for visual and auditory emergency exit indicators

Outside of Building

1. Loading and parking areas close to entrances
2. Covered loading area
3. Convenient parking spaces
4. Spaces wide enough to permit unloading and transferring to a wheelchair
5. Curb cuts in sidewalks
6. Ramps suitable for wheelchairs
7. Handrails provided
8. Doorways wide enough for wheelchairs
9. Surfaces of floors and walkways of non-slippery texture
10. Entrance mats and hall carpets which are not barriers
11. Emergency exits for wheelchairs
12. Barrier-free access routes available for students who want to reach outdoor areas

Equipment

Equipment should be adequate for a program to meet the needs and interests of all students. Activities should include items necessary for a regular program of physical education as well as equipment that may be used by students with special needs. Schools without extensive special equipment and supplies can initiate and conduct quality physical education programs for the handicapped if the persons responsible for physical education are resourceful and creative.

Basic Equipment

A suggested basic list of equipment such as balls, bats, mats, apparatus, etc., needed in the physical education program can be found in the Department of Education's publications, Physical Education, Kindergarten Through Grade Seven and Physical Education for Virginia Secondary Schools. (See Bibliography No's.

24 and 25.) The list is suggestive and may be expanded to meet curriculum needs. Equipment for the visually impaired and blind may be secured from the Virginia Commission for the Visually Handicapped.

Adaptive Physical Education Equipment

A study should be made of the student population to determine which students can best be assisted through the use of special or adaptive physical education equipment. The purchase of special equipment should be based upon projected priority needs of students through the creative and cooperative effort of students, parents, teachers, school administrators, and supportive agencies. The following are ways in which equipment can be adapted to the needs of handicapped students for use in bowling:

1. Providing a wheelchair student with a bowling ball ramp;
2. Providing a blind student with a bowling rail;
3. Providing a student having poor hand strength with a special ball with a retractable handle;
4. Providing a cerebral-palsied student with a homemade or special bowling ball pusher; and
5. Providing a student with limited strength with lightweight, plastic bowling balls and pins.

Inexpensive and Homemade Equipment

Many times funds may not be available to purchase all the equipment needed for a program. Teachers with creative ideas may compensate by using homemade equipment to enrich the program. Many times items that make up this equipment can be found in the school, home, and community. Teachers with an idea for a special device may get help with its construction from the school's shop and art department.

Examples of inexpensive items that can be used for homemade equipment include milk cartons, plastic jugs, broom sticks, tires, bicycle innertubes, wooden wire spools, telephone poles, old tennis balls, and ropes. Excellent ideas for homemade and inexpensive equipment can be found in bibliographical reference.

PART IV

BIBLIOGRAPHY

1. Adams, Ronald C. and Alfred N. Daniel and Lee Rullman. Games, Sports, and Exercises for the Physically Handicapped. Second edition. Philadelphia, Pennsylvania: Lea and Febiger, 1975.

2. The American Red Cross. Adapted Aquatics: Swimming for Persons with Physical or Mental Impairments. Washington, D. C.

3. Arnheim, Daniel D. and David Auxter, and Walter C. Crowe. Principles and Methods of Adapted Physical Education. Second edition. St. Louis, Missouri: C. V. Mosby, Company, 1976.

4. Braley, Konicki, Leedy. Dailey Sensorimotor Training Activities. Freeport, New York: Educational Activities, Inc. 1968.

5. Buell, Charles E. Physical Education for Blind Children. Second edition. Springfield, Illinois: Charles C. Thomas Publisher, 1975.

6. Chaney, Clara M. and Mewelt C. Kephart. Motoric Aids to Perceptual Training. Columbus, Ohio: Charles E. Merrill Publishing Company.

7. College and University Facilities Guide for Health, Physical Education, Recreation, and Athletics. Washington, D. C.: Athletic Institute and AAHPER, 1968

8. Cratty, Bryant J. Developmental Sequences of Perceptual-Motor Tasks. Freeport, L.I., New York: Educational Activities, Inc., 1967.

9. Dewey, Margaret and Russell. Teaching Physical Education to Special Students. Portland, Maine: J. Western Walch Publishers, 1974.

10. Educational Motion Pictures for Virginia's Public Schools. Richmond, Virginia: Virginia Department of Education; Bureau of Teaching Materials, 1976.

11. Fait, Hollis F. Special Physical Education: Adapted, Corrective, Developmental. Third edition. Philadelphia, Pennsylvania: W. B. Saunders Company, 1972.

12. Frankel, Max G. and F. William Happ and Maurice P. Smith. Functional Teaching of the Mentally Retarded. Second edition. Springfield, Illinois: Charles C. Thomas, 1975.

13. Geddes, Dolores. Physical Activities for Individuals with Handicapping Conditions. St. Louis, Missouri: C. V. Mosby Company, 1974.

14. Grosse, Susan J., and Monica C. Becherer. Physical Education Activities for the Uncoordinated Student. West Nyack, New York: Parker Publishing Company, 1975.

15. Guide for Curriculum Development for Teachers of Trainable Mentally Retarded Children. Richmond, Virginia: Division of Special Education, 1973.

16. Haring, Norris G. Behavior of Exceptional Children. Columbus, Ohio: Charles E. Merrill Publishing Company, 1974.

17. Haring, Norris G. and Richard L. Schiefelbusch. Methods in Special Education. New York: McGraw-Hill Book Company

18. Harvat, Robert W. Physical Education for Children with Perceptual-Motor Learning Disabilities. Columbus, Ohio: Charles E. Merrill Publishing Company, 1971.

19. Instruction of Physically Handicapped Minors in Remedial Physical Education. California State Department of Education, 1970.

20. Kepart, Newell C. The Slow Learner in the Classroom. Second edition. Columbus, Ohio: Charles E. Merrill Publishing Company

21. Klappholz, Lowell (editor). Physical Education for the Physically Handicapped and Mentally Retarded. Old Saybrook, Connecticut: Physical Education Publications, 1969.

22. Lindsey, Carolyn N. Early Learning. Richmond, Virginia: Medical College of Virginia, 1977.

23. Mainford, James C. and Harold D. Lowe. Teaching Educable Mentally Retarded Children. Springfield, Illinois: Charles C. Thomas, 1973.

24. Physical Education: Kindergarten Through Grade Seven. Richmond, Virginia: Division of Elementary and Special Education, Reprint, November, 1970.

25. Physical Education for Virginia Secondary Schools. Richmond, Virginia: Division of Secondary Education, Reprint, October, 1968.

26. Robins, Ferris and Jennet Robins. Educational Rhythmics for Mentally and Physically Handicapped Children. New York: Association Press, 1968.

27. Sasne, Michael. Handbook of Adapted Physical Education Equipment and Its Use. Springfield, Illinois: Charles C. Thomas, 1973.

28. Schrag, Judy A. and Thomas N. Fairchild. Individualized Educational Programming (IEP). Austin, Texas: Learning Concepts.

29. Sherrill, Claudine. Adapted and Developmental Physical Education and Recreation: A Multidisciplinary Approach. Dubuque, Iowa: William C. Brown Company, 1976.

30. Sontag, Edward and Judy Smith and Nick Certo. Educational Programming for the Severely and Profoundly Handicapped. Reston, Virginia: The Council for Exceptional Children, 1977.

31. Vodala, Thomas M. Individualized Physical Education Program for the Handicapped Child. Englewood Cliffs, New Jersey: Prentice-Hall, Inc. 1973.

32. Werner, Peter N. and Richard A. Simmons. Inexpensive Physical Education Equipment for Children. Burgess Publishing Company, 1976.

33. Wheeler, Ruth H. and Agnes M. Holley. Physical Education for the Handicapped. Second edition. Philadelphia, Pennsylvania: Lea and Febiger, 1976.

34. National Center on Educational Media and Materials for the Handicapped. The Ohio State University, Columbus, Ohio 43210

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Publications that may be obtained from the American Alliance of Health, Physical Education and Recreation, 1201 16th Street, N.W., Washington, D. C. 20036

35. Adapted Physical Education Guidelines: Theory and Practice for the Seventies and Eighties

36. Annotated Bibliography on Movement Education

37. Annotated Bibliography on Perceptual-Motor Development

38. Annotated Listing of Films: Physical Education and Recreation for Impaired, Disabled, and Handicapped Persons

39. Annotated Research Bibliography in Physical Education, Recreation, and Psychomotor Function of Mentally Retarded Persons

40. Aquatic Recreation for the Blind

41. Best of Challenge - a compilation of the best articles

42. Challenging Opportunities for Special Populations in Aquatic, Outdoor and Winter Activities

43. Dance for Physically Disabled Persons: A Manual for Teaching Ballroom, Square and Folk Dances to Users of Wheelchairs and Crutches

44. Early Intervention for Handicapped Children Through Programs of Physical Education and Recreation

45. Foundations and Practices in Perceptual-Motor Learning: A Quest for Understanding

46. Guide to Information Systems in Physical Education and Recreation for Impaired, Disabled, and Handicapped Persons

47. Integrating Persons with Handicapping Conditions into Regular Physical and Recreation Programs

48. Involving Impaired, Disabled and Handicapped Persons in Regular Camp Programs

49. Making Physical Education and Recreation Facilities Accessible to All

50. Materials on Creative Arts for Persons with Handicapping Conditions

51. Motor Fitness Testing Manual for the Moderately Mentally Retarded

52. Physical Activities for Impaired, Disabled, and Handicapped Individuals

53. Physical Activities for the Mentally Retarded (Ideas for Instruction)

54. Physical Education and Recreation for Cerebral Palsied Individuals

55. Physical Education and Recreation for Impaired, Disabled, and Handicapped Individuals: Past, Present, Future

56. Physical Education and Recreation for Individuals with Multiple Handicapping Conditions

57. Physical Education and Recreation for the Visually Handicapped

58. Physical Education, Recreation, and Related Programs for Autistic and Emotionally Disturbed Children

59. Physical Education, Recreation, and Sports for Individuals with Hearing Impairments

60. Planning Facilities for Athletics, Physical Education and Recreation

61. Practical Guide for Teaching the Mentally Retarded to Swim

62. Professional Preparation in Adapted Physical Education, Therapeutic Recreation and Corrective Therapy

63. Programming for the Mentally Retarded in Physical Education and Recreation

64. Recreation and Physical Activity for the Mentally Retarded

65. Special Fitness Test Manual for Mildly Mentally Retarded Persons

66. Special Olympics Instructional Manual -- From Beginners to Champions

67. Testing for Impaired, Disabled, and Handicapped Individuals

68. Values of Physical Education, Recreation, and Sports for All

69. Youth Fitness Test

APPENDIX

APPENDIX A

SAMPLE INDIVIDUALIZED EDUCATIONAL PROGRAM SAMPLE

I. Student Name John Doe, Jr. Date of Birth 1-24-61 Age 16 School Divisions Stony Point

Parent/Guardian Mrs. John Doe Date of Eligibility 6-15-77 Date of IEP Implementation 9-6-77

Address 1736 Bay Street Categorical Identification E.M.R.

II. Present Level of Performance (Summary Data)

Academic:

	Piat	
	Reading Recognition	2.3
Key Math	Reading	3.6
3.8	Spelling	2.0
Dolch Sight	Reading Comprehension	4.8
Word Inventory	Mathematics	4.2
263 Words Mastered	General Knowledge	5.9

AAHPER Physical Fitness Test (Refer to charts/age group)

Items	
Pull-up/flexed arm hang	5
Sit-ups (flexed legs)	41
Shuttle run	10.1
50 yard dash	6.7
600 run-walk	1:55
Standing Broad Jump	6'9"

Behavior:

John is very shy and lacks physical fitness. There is little eye contact with others. He is well mannered. John gets discouraged easily when working in language areas. He performs well in math. His social skills are limited. John is interested in wood-working. Carpentry may provide a setting for advancement and training after he has obtained the necessary prevocational orientation.

III. Long-Term Goals

1. All items on the AAHPER Physical Fitness Test will increase to the 50th percentile (above satisfactory) by the end of the school year.

2. a. To increase sight word vocabulary and survival words.
   b. To increase skills in reading through spelling skills and decoding skills.
   c. To increase math processes skills to include banking and savings.
   d. To demonstrate planning of careers, duties of specific jobs, and survival forms of applications.
   e. To provide instruction in local, state, and national governments.
   f. To increase self-confidence and social adaptability

IV. Education and/or Related Services	Date to Begin	Anticipated Completion Date	Environment	Location	Personnel
E.M.R.	9-6-77	through high school	4 periods - Self-contained	Virginia High School	Mrs. Green
Physical Education	9-6-77	through grade 10	1 period per day - regular	Virginia High School	Mr. Dean
Vocational Orientation	9-6-77	through high school	1 period regular	Virginia High School	Vocational Rehabilitation W.I.N. Program

V. Short Term Objectives

OBJECTIVES	METHODS	SPECIAL MATERIALS AND EQUIPMENT	DATES BEGUN	DATES COMPLETION	Continuation and/or Modification
P.E.	Establish warm-up stations to be used for following activities:				
1. Student's performance levels should show improvement in efforts to obtain the 50th percentile	1. To perform sit-ups three times per week	Tape, stop watch, horizontal bar	9/6	5/4	Mastered/ Maintain
	2. To perform pull-ups three times per week		9/6	5/4	Cont./Inc. No. per week
	3. To perform shuttle-run two times per week		9/6	5/4	Cont./Inc. No. per week
	4. To run three 50-yard wind sprints per week		9/6	5/4	Cont./Modif. No.
	5. To jump vertically one minute three times per week		9/6	5/4	exercise
	6. To run one 600-yard run-walk per week		9/6	5/4	Mastered/ Continue
Academic					
1. To master Dolch sight vocabulary and survival words		Flash cards, word finds, crossword puzzles	9/15	6/3	Continue/ increase
2. To spell and define 10 words per week	Cover and write method		9/15	6/3	Modify
3. To, etc.			9/15	6/3	Continue

VI. Participants - Individualized Education Program

Date	Signature of Persons Present	Relationship to Student
9-1-77	Mrs. Ann Long	Guidance Counselor
9-1-77	Mrs. Louise Green	EMR Teacher
9-1-77	Mr. George Dean	Physical Education Teacher
9-1-77	Mrs. John Doe	Parent
9-1-77	Ms. Matilda Snodgrass	Psychologist
9-1-77	Mr. Oscar Rinklefender	Director of Special Education

I GIVE PERMISSION FOR MY CHILD John Doe to be enrolled in the special program described in the individualized education program plan. I understand that I have the right to review his/her records and to request a change in his/her individualized education program at any time. I understand that I have the right to refuse this permission and to have my child continue in his/her present placement pending further action.

I did participate in the development of the individualized education program - YES X NO _____

I did not participate in the development of the individualized education program, but I do approve of the plan.

YES _____ NO _____

9/1/77
Date

Mrs. John Doe
Signature of Parent/Guardian

I DO NOT GIVE PERMISSION FOR MY CHILD _____ to be enrolled in the special education program described in the individualized education program. I understand that I have the right to review his/her records and to request another placement. I understand that the action described above will not take place without my permission or until due process procedures have been exhausted. I understand that if my decision is appealed, I will be notified of my due process rights in this procedure.

_____
Date

_____
Signatue of Parent/Guardian

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APPENDIX B

SAMPLE INDIVIDUALIZED EDUCATION PROGRAM SAMPLE

I. Student Name Sue Smith Date of Birth 1-1-67 Age 10 School Divisions Riverend

Parent/Guardian Mr. & Mrs. J. M. Smith Date of Eligibility 6-15-77 Date of IEP Implementation 9-8-77

Address 206 N. Park Place Categorical Identification Learning Disabilities

II. Present Level of Performance (Summary Data)

Academic: At grade 4.8:

Reading	3.5	
Spelling	1.8	WRAT
Arithmetic	4.9	

Physical Education: Lacks coordination while participating in physical activities

Behavior: Eager to learn; poorly organized; difficulty in completing work on time; difficulty in staying on task; poor self-concept; gets along well with peers.

III. Long-Term Goals:

1. Bring reading word attack skills up nine months by end of school year, as measured by standardized test.
2. Improve spelling grade equivalent score on standardized test by six months by end of school year.
3. Increase near-point copying speed by 10 letters per minute; standardize writing so it is all in cursive form.
4. Improve large muscle coordination.

IV. Education and/or Related Services	Date to Begin	Anticipated Completion Date	Environment	Location	Personnel
Resource	9/8/77		5 days a week, 50-60 min. per day	Circle School	Virginia Grace
Physical Education	9/8/77	6/1/78	2 days a week Modified-Regular	Circle School	Jim Richmond
Physical Education			3-day-Regular	Circle School	Grace Penn

V. Short Term Objectives

OBJECTIVES	METHODS	SPECIAL MATERIALS AND EQUIPMENT	DATES BEGUN	DATES COMPLETION	DATES Continuation and/or Modification
To be able to read 50 phonetic one syllable consonant-vowel consonant words with 90% accuracy	Have student read one syllable CVC nonsense syllables, involving all short vowels If there is confusion between two vowel sounds, have student read consonant-vowel-consonant lists containing only one of the sounds until that is secure; then introduce the other confused vowel in consonant-vowel-consonant words. Then mix words containing the vowel sounds.	pp. 4-5 Solving Language Difficulties Phonetic Word Lists - pp. 1-8	9-12	10/24	
To be able to spell 25 words ending in ing/ang/eng/ong/ung/ with 90% accuracy	First use words beginning with a single consonant and ending in ing/ang/ etc. Then use words beginning with consonant blends ending in ing/ang/etc.	p. 26 Phonetic Word List p. 9 Graded and Classified Spelling Lists	9/12	10/24	

Short-Term Objectives

OBJECTIVES	METHODS	SPECIAL MATERIALS AND EQUIPMENT	DATES		
			BEGUN	COMPLETION	Continuation and/or Modification
To be able to form 100% lower case cursive letters correctly to dictation.	Teach similar cursive forms at same time. Have student trace first, saying letter name aloud. Then copy, then write to dictation. Group by letter families at first; when student can write 100% of letters in all families correctly, then mix letters, for dictation.	"Letter Families"	9/12	10/24	
To be able to toss an 8 1/2 inch ball into a 36 inch circle 8 feet away 80% of the time.	First acquaint student with ball handling by having her roll a 12 inch ball into an 18 inch enclosure with 12 inch flanges, with child standing at whatever distance is necessary to assure 95% success rate. Gradually increase distance between child and target. Gradually increase difficulty of task by decreasing size of target and ball, and increasing distance between child and target. Increase the difficulty only as often as to maintain the 95% success rate Have student stand at a distance that she can toss 8 1/2 inch balls successfully into a 36 inch circle at least five times. As student improves, she is moved back gradually until the distance is 8 feet from the target and will be able to successfully complete the objective. This task should be performed at least three times a week.	12 inch ball 10 inch ball 8 1/2 inch ball	9/8	6/1	

Short-Term Objectives

OBJECTIVES	METHODS	SPECIAL MATERIALS AND EQUIPMENT	DATES		
			BEGUN	COMPLETION	Continuation and/or Modification
To jump rope 15 consecutive times.	To practice jumping long rope while it is turned by two other classmates at least 15 consecutive times without missing. This should be done for five minutes at least three times a week. After completing this task, the student should start practicing with the individual jump rope. To practice jumping rope for five minutes at least three times a week. Student will hold one end of rope in each hand, turn it, and jump across it.	One long and one short jump rope	9/15	6/1	
To successfully perform the basic locomotor skills in physical education activities.	Practice the basic locomotor skills in rhythms, games, relays, and other activities.		9/8	6/1	

VI. Participants - Individualized Education Program

Date	Signature of Persons Present	Relationship to Student
8-15-77	Mr. & Mrs. J. M. Smith	Parents
8-15-77	Ms. Grace Penn	Teacher
8-15-77	Ms. Virginia Grace	LD Teacher
8-15-77	Ms. Caroline Franklin	Special Education Coordinator

I GIVE PERMISSION FOR MY CHILD Sue Smith to be enrolled in the special program described in the individualized education program. I understand that I have the right to review his/her records and to request a change in his/her individualized education program at any time. I understand that I have the right to refuse this permission and to have my child continue in his/her present placement pending further action.

I did participate in the development of the individualized education program - YES X NO

I did not participate in the development of the individualized education program, but I do approve of the plan.

YES NO

8/15/77
Date

Mary Sue Smith and Joe Smith
Signature of Parent/Guardian

I DO NOT GIVE PERMISSION FOR MY CHILD _____ to be enrolled in the special education program described in the individualized education program. I understand that I have the right to review his/her records and to request another placement. I understand that the action described above will not take place without my permission or until due process procedures have been exhausted. I understand that if my decision is appealed, I will be notified of my due process rights in this procedure.

_____
Date

_____
Signature of Parent/Guardian

59

60

APPENDIX C

FORM 1

ANY CITY PUBLIC SCHOOLS
SCHOOL HEALTH DEPARTMENT
PHYSICAL EDUCATION DIVISION

Physical Education Medical Referral Form
ASAW #1313-1975

Dear Dr. _____:

(This space can be used for information about state/local physical education requirements, rationale of adapted physical education, objectives and benefits of local programs, organization and administration of local classes, purposes and uses of this form and related areas to improve understanding and communication among physicians, physical educators, parents, and others concerned with and involved in the education, health, and welfare of the student. Procedures for returning the form can be included in this section or at the end of the form.)

John J. Jones, M.D.
Director, School Health Department

George T. Smith, Supervisor
Division of Health, Physical Education, and Athletics

STUDENT INFORMATION

NAME _____ SCHOOL _____
HOME ADDRESS _____ City _____ State _____ Zip _____
HOME TELEPHONE _____ Grade & Section _____

CONDITION

Brief Description of Condition

Condition is ☐ Permanent ☐ Temporary

Comments _____

_____

If appropriate:

Comments about student's medication and its effects on participation in physical activities

_____

_____

Student may return to unrestricted activity_____, 19__

Student should return for reexamination_____, 19__

FUNCTIONAL CAPACITY

☐ Unrestricted - no restrictions relative to vigorousness or types of activities

☐ Restricted - Condition is such that intensity and types of activities need to be limited (check one category below)

☐ Mild - ordinary physical activities need not be restricted but usually vigorous efforts need to be avoided

☐ Moderate - ordinary physical activities need to be moderately restricted and sustained strenuous efforts avoided

☐ Limited - ordinary physical activities need to be markedly restricted

FORM 1 CONT.

ACTIVITY RECOMMENDATIONS

Indicated body areas in which physical activities should be minimized, eliminated, or maximized.

	Maximized	Minimized	Eliminated	Both	Left	Right	Comments Including Any Medical Contraindications to Physical Activities
Neck							
Shoulder Girdle							
Arms							
Elbows							
Hands & Wrists							
Abdomen							
Back							
Pelvic Girdle							
Legs							
Knees							
Feet & Ankles							
Toes							
Fingers							
Other (specify)							

FORM 1 CONT.

REMEDIAL

☐ Condition is such that defects or deviations can be improved or prevented from becoming worse through use of carefully selected exercises and/or activities. The following are remedial exercises and/or activities recommended for this student. (Please be specific).

_____

_____

_____

_____

_____

_____

_____

_____

Signed _____ M.D.

Address _____

_____ Zip _____

Telephone No. ( ) _____

Date _____, 19

APPENDIX D

FORM 2

INDIANA AREA SCHOOL DISTRICT

ADAPTED PHYSICAL EDUCATION FORM

Date_____

Dear Dr._____:

All pupils enrolled in the Indiana Area School District participate in physical education activities which are designed to meet the growth and developmental needs of boys and girls. These activities are to be adapted to meet the needs of the individual pupil. Thus a pupil who is unable to participate in a whole program, due to a specific physiological condition, should have his/her program modified to meet and/or to improve his/her condition. To identify specific needs of each pupil, the physician, parents, and school personnel must work cooperatively. Will you please provide us with the information listed below so that we can provide appropriate activities for _____?
(pupil's name)

FINDINGS AND RECOMMENDATIONS TO THE SCHOOL

I have examined_____and find the following handicaps: _____

I recommend the following: (Check appropriate item or less)

_____ 1. No restriction on any type of activity

_____ 2. Participation in all activities with the exception of intramural or interschool athletics.

_____ 3. Adaptations in physical education to fit individual needs.

_____ a. Little running or jumping

_____ b. No running or jumping

_____ c. No activities involving body contact

_____ d. Exercises designed for rehabilitation

_____ e. Conditioning exercises

FORM 3

_____ 4. Other Adaptations: (specify)_____

_____

_____

_____ 5. The following remedial or corrective work is also suggested for the above mentioned pupil:_____

_____

_____

(if necessary, please attach additional instructions to this form)

I recommend the adaptation for a period of _____ weeks, months, semester.

Date_____ Signature_____

Address_____

_____

Please mail this form to: Royden P. Grove
Eisenhower Elementary School
1460 School Street
Indiana, Pennsylvania 23701

APPENDIX E

FORM 3

ADAPTED PHYSICAL EDUCATION ACTIVITY GUIDE

A Guide for the Teacher and Physician
In Planning a Specially Designed Program of Physical Education

Pupil_____ Date_____

School_____ Teacher_____
Adapted Physical Education

I. MOVEMENTS	OMIT	MILD*	MODERATE**	UNLIMITED	REMARKS
Bending					
Climbing					
Hanging					
Jumping					
Kicking					
Lifting					
Pulling					
Pushing					
Running					
Stretching					
Throwing					
Twisting					

*Very Little Activity

**Half as much as the unlimited program

II. EXERCISE	OMIT	MILD*	MODERATE**	UNLIMITED	REMARKS
Abdominal					
Arm					
Breathing					
Foot					
Head					
Knee					
Leg					
Neck					
Trunk					

*Very Little Activity

**Half as much as the unlimited program

III. ACTIVITIES	YES	NO	REMARKS
Running Games			
Games-standing but no running or jumping			
Sitting Games			

PHYSICIAN'S APPROVAL AND RECOMMENDATIONS

Approved_____ Recommended until_____, 19_____

Comments:

Date_____ Signature of School Physician_____